the second graft segment is deployed partially within the first graft segment; and

a transition element fixed to the inner portion, substantially between the first and second graft segments, the transition element having a smooth tapering diameter in the direction of the first graft segment to facilitate insertion of the second graft segment into the first graft segment after the first graft segment has been deployed.

REMARKS

In response to the Official Action mailed May 16, 2002, Applicants amend their application and request reconsideration in view of the amendments and the following remarks in this Reply. Claims 37 and 46 have been amended. No claims have been canceled or added, so that claims 37-46 remain pending. No new matter has been introduced.

Claims 37-45 were rejected as anticipated by U.S. Patent No. 6,123,722 to Fogarty et al. (Fogarty). This rejection is respectfully traversed.

U.S. Patent No. 6,123,722 to Fogarty et al. discloses stents and stent-grafts for the treatment of aneurysms. Specifically, Fogarty discloses prosthetic modules, which may be selectively combined to form a composite prosthesis. Also disclosed is a delivery catheter which comprises a tubular cover and a shaft

coaxially positioned in the cover. The catheter also comprises a plurality of runners and a nosecone.

The present invention as claimed in amended independent claim 37 is directed to a graft system for repairing an abdominal aortic aneurysm. The system comprises at least one integral, unitary tubular graft component having a first end portion, a second end portion and a middle portion. The middle portion includes one or more independent gripping stents spaced apart from one another and secured to an inner surface of the integral, unitary tubular graft component. And the cross-sectional area of the first and second end portion is greater than the cross-sectional area of the middle portion. The graft component tapers from the first and second end portions to the middle portion.

Anticipation exists only if all of the elements of the claimed invention are found in a system or method disclosed, expressly or inherently, in a single prior art reference. Therefore, if it can be shown that there is one difference between the claimed invention and what is disclosed in the single reference, there can be no anticipation.

Fogarty discloses stent grafts that are modular. It is specifically stated that modular sections of the prostheses may be selectively combined to form a composite prosthesis. In the present invention, as claimed in amended independent claim 37, the graft system comprises an integral, unitary graft component. In other words, a single structure. Fogarty fails to disclose or even remotely suggest "an integral, unitary" structure. In fact, Fogarty teaches away from this structure. Therefore, since

Fogarty fails to disclose this element, there can be no anticipation. Accordingly, reconsideration and withdrawal of the rejection is respectfully requested.

Claim 46 was rejected as unpatentable over Fogarty in view of U.S. Patent No. 5,476,506 to Lunn. This rejection is respectfully traversed.

U.S. Patent No. 5,476,506 to Lunn discloses a graft for placement in a body passageway. The graft is designed such that it is longitudinally expandable and has end portions that are radially expandable. The walls of the central portion are provided with circumferential crimps and the walls of the end portions are provided with axially extending crimps. Lunn does not disclose stent elements.

Section 706.02(j) of the M.P.E.P. states

> "35 U.S.C. 103 authorizes a rejection where, to meet the claim, it is necessary to modify a single reference or to combine it with one or more other references..."

Section 706.02(j) of the M.P.E.P. further states

> "To establish a *prima facie* case of obviousness, three basic criteria must be met. First, there must be some suggestion or motivation, either in the references themselves or in the knowledge generally available to one of ordinary skill in the art, to modify the reference or to combine reference teachings. Second, there must be a reasonable expectation of success. Finally, the prior art reference (or references when combined) must teach or suggest all the claim limitations. The teaching or suggestion to make

> the claimed combination and the reasonable expectation of success must both be found in the prior art and not based on applicant's disclosure..."

As set forth in the M.P.E.P., the prior art references must teach or suggest all the claim limitations. Neither reference, whether taken alone or in combination, disclose or even remotely suggest a graft system having first and second integral, unitary graft systems.

In further support of the allowability of claim 46 is the fact that under 35 U.S.C. § 103, teachings of references can be modified/combined only if there is some teaching, suggestion or incentive to do so. Obviousness cannot be established by combining the teachings of the prior art to produce the claimed invention absent some teaching or suggestion supporting the combination. Here, the prior art of record fails to provide any such suggestion or incentive. Lunn does not disclose a stent-graft, but rather first a graft.

Accordingly, since the Examiner has failed to establish a *prima facie* case of obviousness with respect to claim 46, reconsideration and withdrawal of the rejection is respectfully requested.

Applicants would be grateful for the opportunity to conduct a telephone or in-person interview if the Examiner believes it would be helpful in disposing of the present case.

It is believed that the remarks establish the patentability of the claimed invention over the art of record. Therefore, allowance is respectfully requested.

Attached hereto is a marked-up version of the changes made to the claims by the current amendment. The attached page is captioned "Version With Markings To Show Changes Made".

Respectfully submitted,

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Version With Markings To Show Changes Made

IN THE CLAIMS

Please amend the claims as follows:

37. (Twice Amended) A graft system for repairing an abdominal aortic aneurysm comprising [a] at least one integral, unitary tubular graft component having a first end portion, a second end portion, and a middle portion extending therebetween, the middle portion including one or more independent [support] gripping stents spaced apart from one another and secured to an inner surface of the integral tubular graft component, wherein the {cross-section] cross-sectional areas of the first and second end portions is greater than the [cross-section] cross-sectional area of the middle portion and the graft component tapers from the first and second end portions to the middle portion.

46. (Amended) A graft system for repairing an aneurysm in a vessel comprising:

a delivery catheter having an outer sheath and an inner portion contained within a lumen formed by the outer sheath;

first and second integral, unitary graft segments located in the delivery catheter between the inner portion and the sheath, the first and second graft segments being formed of a material which expands from a radially contracted position to a radially expanded position when the sheath is withdrawn, the first and second graft segments being positioned in the delivery

catheter in a non-overlapping manner such that the first graft segment may be deployed independently of the second graft segment and the second graft segment can be deployed thereafter in a telescoping manner with respect to the first graft segment by advancing the catheter into a lumen formed when the first graft system is deployed and further withdrawing the sheath such that the second graft segment is deployed partially within the first graft segment; and

a transition element fixed to the inner portion, substantially between the first and second graft segments, the transition element having a smooth tapering diameter in the direction of the first graft segment to facilitate insertion of the second graft segment into the first graft segment after the first graft segment has been deployed.